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Application Number	09/896,858			
Filing Date	6/29/2001			
First Named Inventor	Gelfand			
Group Art Unit	2171			
Examiner Name				
Attorney Docket Number	2127			

	U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	U.S. Patent I	Cocument Kind Code ² (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
cN		5,371,675		Greif et al.	12/6/1994		
(3/		5,819,293		Comer et al.	10/6/1998		
CN		5,933,634		Enokido et al.	8/3/1999		
CN		5,937,155		Kennedy et al.	8/10/1999		
LAS .		5,970,506		Kiyan et al.	10/19/1999		
W.		6,081,809		Kumagai et al.	6/27/2000		
CN		6,047,297		Johnson al.	4/4/2000		
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						Cénter 210	
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	FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Office ³	Foreign Patent Do	Kind Code ⁵ (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T6
cW			406/052,139		Muraji et al.	2/25/1994		
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